

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	YGS A-S	956 866	09/21/01 11-28-01

Response

## INDEX OF CLAIMS

- ✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	Original
1	11/6/01
2	C 10/28/01
3	0
4	0
5	✓
6	✓
7	✓
8	✓
9	0
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19	✓ 0
20	✓ =
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27	=
28	N
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31	
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33	✓ N
34	- ✓
35	0
36	0
37	0
38	✓
39	✓
40	✓
41	0
42	0
43	✓
44	0
45	1
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48	✓
49	= 0
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Claim	Date
Final	Original
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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